

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>6.17.05</u>		2 Serial/Patent # <u>10/522,196</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
		7 TOTAL AMOUNT OF REFUND		\$ <u>50.00</u>							
		8 TO BE REFUNDED BY:									
		Treasury Check									
		Credit Deposit A/C #:									
		9 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">0</td><td style="width: 20px; text-align: center;">2</td><td style="width: 20px; text-align: center;">--</td><td style="width: 20px; text-align: center;">0</td><td style="width: 20px; text-align: center;">2</td><td style="width: 20px; text-align: center;">0</td><td style="width: 20px; text-align: center;">0</td></tr></table>			0	2	--	0	2	0	0
0	2	--	0	2	0	0					
10 REASON:											
	Overpayment										
	Duplicate Payment										
	No Fee Due (Explanation):										
<u>Fee Code Correction</u>											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>BAC</u>		TITLE:									
SIGNATURE: <u>BAC</u>		<small>Kepln. Ref: 06/20/2005 BCAMPBEL 0019383100 DAH:020200 FC: 9204</small> <small>Phone Number: 10522196</small> <small>\$50.00 CR</small>									
OFFICE: <u>PCT/DO/EO1</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: _____		DATE: _____									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: